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APPLICANTS

Michael Briere, West Greenwich, RI;

Jeffrey Gordon Dumas, West Warnick, RI;
Bishara Tahhan, Cumberland, RI;

** CONTINUING DATA ***** NONE/AB

** FOREIGN APPLICATIONS ***** NONE/AB

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <u>AB</u> Initials	STATE OR COUNTRY RI	SHEETS DRAWING 6	TOTAL CLAIMS 42	INDEPENDENT CLAIMS 6
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ADDRESS

 26161
 FISH & RICHARDSON PC
 225 FRANKLIN ST
 BOSTON, MA.
 02110

TITLE

EMI FILTER CIRCUIT

FILING FEE RECEIVED 2132	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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